

SEP 01 2005

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WESTMAN CHAMPLIN & KELLY

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="margin: 0;">For FY 2005</p>		Complete if Known	
		Application Number:	09/822,564
		Filing Date	March 30, 2001
		First Named Inventor	Gina Danielle Venolia
		Examiner Name	2176
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	Laurie Anne Ries
TOTAL AMOUNT OF PAYMENT	(\$ 270)	Attorney Docket Number	M61.12-0329

METHOD OF PAYMENT (Check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (Please Identify): _____

☒ Deposit Account - Deposit Account Number: 23-1123 Deposit Account Name: Westman, Champlin and Kelly
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
25	- 20 or HP = 3 x	50	150

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	- 3 or HP = 0 x	200	0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
0	- 100 = 0 / 50 = 0	(round up to a whole number) x	250	0

4. OTHER FEE(S)

	Fee(s) Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	-
Other: One month extension of time fee	120

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	44,029	Telephone: 612-334-3222	
Name (Print/Type)	Linda P. Ji	Date:	9/1/05		

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